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Bib Data Sheet

CONFIRMATION NO. 9087

|  |   |  |                                       |   |
|--|---|--|---------------------------------------|---|
| <b>SERIAL NUMBER</b><br>09/854,977   | <b>FILING DATE</b><br>05/14/2001<br><b>RULE</b>   | <b>CLASS</b><br>707  | <b>GROUP ART UNIT</b><br>2174<br>9455 | <b>ATTORNEY DOCKET NO.</b><br>YOR920000703US1 |
| <b>APPLICANTS</b><br>Scott LeKuch, New York, NY;<br>Ken Inoue, Elmsford, NY;<br>Dan Peter Dumarot, Cornwall, NY;<br>Mary R. Seminara, Ossining, NY;<br>Sreenivasulu Kesavarapu, Terrytown, NY;<br>John Peter Karidis, Ossining, NY;  |   |  |                                       |   |
| <b>** CONTINUING DATA *****</b><br>THIS APPLN CLAIMS BENEFIT OF 60/238,835 10/06/2000<br>AND CLAIMS BENEFIT OF 60/269,299 02/16/2001   |   |  |                                       |   |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |  |                                       |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br>** 07/12/2001  |   |  |                                       |   |
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Me/after<br>Verified and Acknowledged<br>Examiner's Signature: [Signature] Initials: [Initials] | <b>STATE OR COUNTRY</b><br>NY   | <b>SHEETS DRAWING</b><br>4                                     | <b>TOTAL CLAIMS</b><br>24             | <b>INDEPENDENT CLAIMS</b><br>3                |
| <b>ADDRESS</b><br>Harry F. Smith, Esq.<br>Ohlandt, Greeley, Ruggiero & Perle, L.L.P.<br>10th Floor<br>One Landmark Square<br>Stamford, CT 06901-2682   |   |  |                                       |   |
| <b>TITLE</b><br>Front of screen, user interface, and national language support by downloading bitmaps from a PC to a companion device  |   |  |                                       |   |
| <b>FILING FEE RECEIVED</b><br>782  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                       |   |
|  |   | <input type="checkbox"/> All Fees                              |                                       |   |
|  |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |                                       |   |
|  |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |                                       |   |
|  |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |                                       |   |
|  |   | <input type="checkbox"/> Other _____                           |                                       |   |
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